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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

EASTERN DIVISION

In re:	Fransen, Christopher	§ Case No. 04 B 35975
	Debtor	§ §
	2 (0.00)	§
	CHAPTER 13 STANDING TRU	USTEE'S FINAL REPORT AND ACCOUNT
		ubmits the following Final Report and Account of the U.S.C. § 1302(b)(1). The trustee declares as follows:
	1) The case was filed on 09/28/2	5/2004.
	2) The plan was confirmed on 1	11/24/2004.
	3) The plan was modified by or on 12/16/2008.	order after confirmation pursuant to 11 U.S.C. § 1329
	4) The trustee filed action to replan on 10/20/2009, 05/15/2007, 03/18/200	emedy default by the debtor in performance under the 008 and 10/14/2008.
	5) The case was completed on (02/04/2010.
	6) Number of months from filing	ing or conversion to last payment: 65.
	7) Number of months case was	s pending: 66.
	8) Total value of assets abandor	oned by court order: (NA).

10) Amount of unsecured claims discharged without full payment: \$23,222.83.

11) All checks distributed by the trustee relating to this case have cleared the bank.

9) Total value of assets exempted: \$3,000.00.

Receipts:

Total paid by or on behalf of the debtor \$16,373.00

Less amount refunded to debtor \$4.00

NET RECEIPTS: \$16,369.00

Expenses of Administration:

Attorney's Fees Paid Through the Plan \$2,255.20

Court Costs \$0

Trustee Expenses & Compensation \$891.73

Other \$0

TOTAL EXPENSES OF ADMINISTRATION:

\$3,146.93

Attorney fees paid and disclosed by debtor

Scheduled Creditors:								
Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid		
Internal Revenue Service	Priority	\$950.00	\$1,611.09	\$1,611.09	\$1,611.09	\$0		
CitiFinancial Auto Credit Inc	Secured	\$8,600.00	\$8,600.00	\$8,600.00	\$8,600.00	\$897.21		
Asset Acceptance	Unsecured	NA	\$716.37	\$716.37	\$71.64	\$0		
Asset Acceptance	Unsecured	\$1,602.81	\$1,619.96	\$1,619.96	\$162.00	\$0		
Associated St James Radiologis	Unsecured	\$852.00	NA	NA	\$0	\$0		
BMG Music Service	Unsecured	\$46.45	NA	NA	\$0	\$0		
CitiFinancial Auto Credit Inc	Unsecured	\$7,821.00	\$5,445.42	\$5,445.42	\$544.54	\$0		
Dermatology & Skins Systems	Unsecured	\$246.84	NA	NA	\$0	\$0		
Excel Emergency Care	Unsecured	\$865.00	NA	NA	\$0	\$0		
Financial Credit Corp	Unsecured	\$1,343.06	NA	NA	\$0	\$0		
GAD	Unsecured	\$524.00	NA	NA	\$0	\$0		
Illinois State Tollway	Unsecured	\$5,420.80	\$5,584.00	\$5,584.00	\$558.40	\$0		
Internal Revenue Service	Unsecured	NA	\$9.30	\$9.30	\$0.93	\$0		
Minimally Invasive Spine Specialists	Unsecured	\$236.00	NA	NA	\$0	\$0		
Pathology Consultants Inc	Unsecured	\$94.94	NA	NA	\$0	\$0		
St James Hospital	Unsecured	\$7,762.56	\$7,762.56	\$7,762.56	\$776.26	\$0		

NA

Summary of Disbursements to Creditors:							
	Claim Allowed	Principal Paid	Interest Paid				
Secured Payments:							
Mortgage Ongoing	\$0	\$0	\$0				
Mortgage Arrearage	\$0	\$0	\$0				
Debt Secured by Vehicle	\$8,600.00	\$8,600.00	\$897.21				
All Other Secured	\$0	\$0	\$0				
TOTAL SECURED:	\$8,600.00	\$8,600.00	\$897.21				
Priority Unsecured Payments:							
Domestic Support Arrearage	\$0	\$0	\$0				
Domestic Support Ongoing	\$0	\$0	\$0				
All Other Priority	\$1,611.09	\$1,611.09	\$0				
TOTAL PRIORITY:	\$1,611.09	\$1,611.09	\$0				
GENERAL UNSECURED PAYMENTS:	\$21,137.61	\$2,113.77	\$0				

<u>Disbursements:</u>								
Expenses of Administration	\$3,146.93							
Disbursements to Creditors	\$13,222.07							
TOTAL DISBURSEMENTS:		\$16,369.00						

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12) The trustee certifies that, pursuant to Federal Rule of Bankruptcy Procedure 5009, the estate has been fully administered, the foregoing summary is true and complete, and all administrative matters for which the trustee is responsible have been completed. The trustee requests a final decree be entered that discharges the trustee and grants such other relief as may be just and proper.

Date: March 24, 2010 By: __/s/ MARILYN O. MARSHALL
Trustee

STATEMENT: This Uniform Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.